

OFFICE OF DRUG CONTROL POLICY KENTUCKY JUSTICE AND PUBLIC SAFETY CABINET

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LAURIE K. DUDGEON, EXECUTIVE DIRECTOR, ODCP - JUSTICE & PUBLIC SAFETY CABINET

2ND QUARTER, 2007

ODCP EXECUTIVE DIRECTOR LAURIE K. DUDGEON APPOINTED AS DEPUTY DIRECTOR OF ADMINISTRATIVE OFFICE OF THE COURTS



Laurie K. Dudgeon has been named deputy director of the Administrative Office of the Courts. Dudgeon began serving as an attorney with the Justice and Public Safety Cabinet in 2005 and spent the past year as the executive

director of the Office of Drug Control Policy.

"Laurie is a highly intelligent individual who is dedicated to serving the people of Kentucky, as evidenced by her work with the Office of Drug Control Policy," said AOC Director Jason M Nemes. "The combination of her legal expertise and administrative abilities will enable her to make a strong contribution in the position of deputy director. Laurie's energy and her interest in the future of the court system make her an excellent fit for the AOC."

"I have a great deal of respect for the integrity and independence of the Kentucky judiciary," said Dudgeon. "I am honored to be offered this

opportunity and I look forward to joining the court system as it breaks new ground in critical areas."

Laurie graduated from the University of Kentucky with a bachelor's degree in history in 1991 and a juris doctor from the UK College of Law in 1994.

Dudgeon has been actively involved in local charities, including Hospice of the Bluegrass, the American Cancer Society and the New Horizons Child Development Center.

The AOC supports the activities of more than 3,500 Kentucky Court of Justice employees, including the elected offices of justices, judges and circuit court clerks, and executes the Judicial Branch budget. The deputy director assists the AOC director in overseeing the daily operations of the state court system.

Justice and Public Safety Cabinet Deputy Secretary Teresa Barton will facilitate the day to day operations of ODCP until a replacement is named.

THIS ISSUE

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OFFICE OF DRUG CONTROL POLICY QUARTERLY BULLETIN

RESEARCH SHOWS JAIL AND PRISON-BASED SUBSTANCE ABUSE TREATMENT INITIATIVES WORKING

Representatives from each of the substance abuse treatment programs in Kentucky jails and prisons were invited to an outdoor celebration Thursday, May 10, to hear the results of the first research from those programs.

"Obviously we wouldn't be here today if it wasn't good news," said Department of Corrections Commissioner John D. Rees. "We haven't won the war by any means, but this is the first good battle news anybody has had in a long time."

At the first outset of any expansion of substance abuse treatment, a decision was made to contract with the University of Kentucky's Center on Drug and Alcohol Research.

"Not only will they provide the validation that we need – proof that we are in fact headed in the right direction – they will guide and help modify our treatment plans for the best possible course for the future," said Rees. "We must be able to prove our worthiness to not only the General Assembly that provides our funding, but to the general public. The citizens of Kentucky deserve to know that we are first working to keep them safer in

this fight against the substance abuse problem, but also that we are spending their money wisely."

The research showed three key successes:

- Illegal drug use decreased for jail and prison clients
- Most (80 percent of jail and 90 percent of prison) clients attended AA/NA and many (48 percent of jail and 90 percent of prison) participated in community treatment
- About two-thirds for both jail and prison clients were not incarcerated at 12 months upon release

The number of prison and jail substance treatment beds has grown dramatically since 2004 when the number of treatment beds was around 450, compared to the current total of approximately 1,400. The number of jail programs has grown from two in 2004 to the current number of 14. Prison programs have grown from four in 2004 to the seven we have now.

And this summer, the first of 10 "Recovery Kentucky" centers will open its doors and provide additional treatment beds. These centers will provide 1,000 more beds.

HARLAN EDUCATOR NAMED "A TEACHER WHO MADE A DIFFERENCE"



Harlan County's Henry Hughes has been honored as "A Teacher Who Made A Difference."

The program, sponsored by the University of Kentucky College of Education, gives Kentuckians an opportunity to thank the teachers, principals, college professors, and other educators in the state for the way they have inspired and motivated students to succeed.

Winners are not selected from a pool of nominees. Rather, the UK College of Education created the program to provide individuals a means to express thanks to educators who have impacted their lives. The event honors the first 100 teachers officially submitted for recognition. Since the program's inception, over 1,000 teachers have been honored.

Hughes, a member of the UNITE Coalition at Southeast Kentucky Community and Technical College's Cumberland Campus, was nominated for the award by UNITE Kentucky River Coalition Coordinator Tom Vicini. The award was presented in Lexington on April 28.

Hughes was selected because of his tireless efforts in bringing a drug-free message to the students of SKCTC-Cumberland, for his highly successful direction of the area's Hooked On Fishing-Not On Drugs® (HOFNOD) program, and his continuing leadership of the United For Jesus program in Cumberland.

"A man of service" who has gone above and beyond to help youth in Harlan County, Hughes was named the Operation UNITE "Mentor of the Year" for 2006.

Hughes was instrumental in starting the Cumberland Division of Celebrate Recovery. In addition, he runs United For Jesus Ministries in Cumberland twice a week and uses UNITE materials as a continuing education teacher at Southeast Community College.

Hughes gives so much of his own time and finances to make sure all students have the opportunity to take part in programs, always has a positive word to say, and is never judgmental.

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SUBSTANCE ABUSE INITIATIVES

The past several months have been very exciting for the field of substance abuse. In several areas, the seeds planted early in the Fletcher administration are beginning to reach fruition. In the treatment arena, a team of stakeholders has been working on an expanded Medicaid benefit for those suffering from substance abuse related issues. Since 2002, Kentucky has provided a Medicaid benefit to pregnant women and those who are sixty days post-partum, offering a wide variety of prevention and treatment services. Kentucky is proposing to expand the population covered by the existing benefit.

Most states offer a comprehensive Medicaid benefit for substance abuse prevention and treatment. The proposed expansion would include those persons who are specified as the relative caring for a child who has Medicaid coverage. The child must be physically living in the home with the specified relative in order for the relative to be covered by the substance abuse benefit. The benefit will include a wide variety of services ranging from prevention to treatment and case management.

Initially, the expansion of a Medicaid benefit will be piloted in three regions of the state – the northern Kentucky region; Elizabethtown and surrounding counties; and Lexington and surrounding counties. The target for the expansion is the fall of 2007, allowing many more children to be raised in homes with recovering individuals, rather than living in homes with active addiction. It is anticipated that this benefit will reach nearly 8,000 people in its first year. The long term goal is for this benefit to be accessible state-wide to this population.

In the prevention arena, Kentucky is making great strides in addressing the prevention of substance use among our youth. In 2005, Kentucky was awarded the Strategic Prevention Framework State Incentive Grant by the Substance Abuse and Mental Health Services Administration (SAMHSA). This large grant has afforded a number of opportunities including the development of a data warehouse accessible on the internet. The data warehouse allows communities and planning agencies to access the latest data for making decisions in strategic planning and funding.

A most recent addition to the data warehouse is the 2006 KIP Survey of over 100,000 students in 137 school districts across Kentucky. The results of the report indicate that over 30% of Kentucky's tenth grade students have used tobacco products in the last 30 days; over 43% of seniors in high school have used alcohol in the past 30 days; in some parts of the state over 3% of tenth grade students report heavy use of narcotics. The full report can be seen on the web at

http://sig.reachoflouisville.com/. This data is invaluable to communities and agencies as they look at planning around issues in their efforts.

Eight counties across the Commonwealth were chosen for intensive prevention initiatives: Owsley, Owen, Letcher, Clinton, Clay, Monroe, Ohio and Muhlenberg. These communities have completed the first steps in the Strategic Prevention Framework which provides a structure for assessing needs, resources and strategic planning. All of the counties have received funding and are beginning their work on a variety of projects to address the drug use and abuse issues in their communities. The results of their work will be shared and implemented statewide following the evaluation of the outcome of their efforts. To date, the Strategic Framework has been implemented in eleven additional counties through the KY ASAP network. Ultimately, the goal is to have all prevention entities using the Framework for assessment and planning.

Karyn Hascal, Deputy Director for ODCP

UPCOMING EVENTS

The Office of Drug Control Policy will have a booth at the Kentucky State Fair from Thursday, August 16-25. Stop by the Main Street Kentucky area in the South Wing and visit.

September 5 Drug Endangered Child Institute, Marriott Lexington (part of Prevent Child Abuse Kentucky Conference)

September 18-20 Western Kentucky Narcotics Interdiction Training is being held in Paducah, KY

September 20 Kentucky Association for Psychology in Schools (Radisson, Lexington)

September 21 Kentucky Nurse's Association Methamphetamine Summit, Bowling Green, KY

November 1-2 KY-ASAP and Champions Joint Conference, Hurstbourne Holiday Inn, Louisville, KY

OFFICE OF DRUG CONTROL POLICY QUARTERLY BULLETIN

METHADONE LEADING CAUSE OF OVERDOSE VICTIMS IN KENTUCKY

Overdose due to methadone is on the rise in Kentucky. The 2006 Office of the State Medical Examiner's Annual Report indicates 197 deaths related to the misuse of the prescription drug methadone. Methadone was the prescription drug that was most frequently detected in the blood of fatal overdose victims.

The numbers reflect the total cases undergoing autopsies by the Kentucky Medical Examiner's Office in 2006. Methadone was detected in 41% of the 484 overdose death cases in Kentucky.

"Prescription drug overdoses in general, and methadone overdoses in particular, claim a large number of lives each year in the Commonwealth. These tragic deaths of Kentuckians are unnecessary and preventable," said Kentucky Chief Medical Examiner Dr. Tracey Corey. "Regional and local medical societies and health departments may help reduce this tragic loss of life by making patients and physicians aware of the possibility of accidental fatal overdose associated with the use of prescription narcotics, especially when used in concert with other prescription drugs."

Figures from the Kentucky All Schedule Prescription Electronic Reporting (KASPER) system, supplied by Dave Sallengs, R.Ph., branch manager of Drug Enforcement and Professional Practices in the Office of the Inspector General of the Cabinet for Health and Family Services, show neither the number of prescriptions filled in Kentucky for methadone, nor the number of dosage units prescribed have changed significantly from 2003 through 2006.

"Since methadone has a shorter duration in the body than other controlled substance pain relievers the daily dosage is higher," stated Sallengs. "This could lead to a perception by patients that they could use increased dosages without concern about overdose. More patient education by prescribers and pharmacists when methadone is prescribed could help diminish the incidence of these overdoses."

"It is important to get the message out and warn the citizens of Kentucky about the misuse of Methadone. I urge all members of law enforcement, hospitals, poison control centers, and emergency medical technicians to continue educating themselves on the effects and symptoms associated with methadone abuse," said Kentucky Office of Drug Control Policy

Executive Director Laurie Dudgeon. "The seriousness of methadone overdose and its possible consequences cannot be overemphasized."

A recent federal government study found that nationwide methadone-related deaths climbed to more than 3,800 in 2004 from about 780 in 1999.

Facts on methadone

- * Methadone is commonly prescribed for treating patients suffering from chronic pain and medical professionals describe methadone as an effective tool for pain management.
- * Methadone used to treat pain can be prescribed by a medical professional licensed to prescribe controlled substances in Kentucky.
- * Prescriptions written for methadone are reported by dispensers to the KASPER system as well as prescriptions filled for methadone by pharmacies.
- * In Kentucky, methadone is also used to treat the addiction of narcotics/opiates by clinics licensed to do so. It is the most used drug for the treatment and maintenance of narcotic addiction.

Methadone is a legal medication produced by licensed and approved pharmaceutical companies using quality control standards. Under a physician's supervision, it is administered orally on a daily basis with strict program conditions and quidelines.

About 20% of the estimated 810,000 heroin addicts in the United States receive MMT (American Methadone Treatment Association, 1999). At present, the operating practices of clinics and hospitals are bound by Federal regulations that restrict the use and availability of methadone. These regulations are explicitly stated in detailed protocols established by the U.S. Food and Drug Administration (FDA). Additionally, most States have laws that control and closely monitor the distribution of this medication.

Like any controlled substance, there is a risk of abuse. When used as prescribed and under a physician's care, research and clinical studies suggest that long-term MMT is medically safe (COMPA, 1997). When methadone is taken under medical supervision, long-term maintenance causes no adverse effects to the heart, lungs, liver, kidneys, bones, blood, brain, or other vital body organs.

OFFICE OF DRUG CONTROL POLICY QUARTERLY BULLETIN

KENTUCKY PARTICIPATES IN DRUG ENFORCEMENT OPERATION

State police, local law enforcement, sheriff's offices, HIDTA and multi-jurisdictional drug task forces throughout the nation collectively conducted undercover investigations, search warrants, consent searches, marijuana eradication efforts, drug interdiction and arrest warrants for a period of one week. This collective effort, Operation Byrne Drugs II, was conducted from April 23-29 to highlight the need and effectiveness of the Byrne grant funding and the impact cuts to this funding could have on local and statewide drug enforcement.

The Edward Byrne grant program is named for a New York City police officer who was killed at a young age by organized drug traffickers who were trying to prevent a witness from being able to testify in a drug case.

"The operation is just one step in Kentucky's efforts to stop the sale of illegal drugs in our state," said BG Norman Arflack, secretary of the Justice & Public Safety Cabinet. "We're taking an aggressive approach in order to make the public aware of the critical need for continued funding with the overall goal of cleaning up the streets and providing a safer environment for all of our citizens."

Statewide, last week's operation resulted in 491 arrests, 30 search warrants and the seizure of 287 marijuana plants,

approximately 965 pounds of marijuana, approximately 12 pounds of cocaine, 266 hydrocodone tablets, 950 other prescription tablets, 467 grams of methamphetamine, six meth labs, four drug endangered children, 26 guns, 14 vehicles and \$148,201 in cash. Cabinet for Health and Family Services also removed 12 children from homes during arrests and a female was charged with Wanton Endangerment First Degree when she and her newborn tested positive for Cocaine.

"The number of arrests and seizures that each drug task force made is representative of what Kentucky's law enforcement can accomplish when resources are pulled together to take illegal drugs off the streets," stated Tommy Loving, executive director of the Bowling Green/Warren County Drug Task Force and president of Kentucky Narcotics Officers Association. "As a statewide organization, KNOA is hopeful that congress will see the value of intensive drug enforcement efforts like this one, and consider the benefits that could be derived by reinstating previous funding levels in the future."

Laurie Dudgeon, the executive director of the Office of Drug Control Policy, said statistics from the one-week sweep "is symbolic to the dangers and hard work that these units and agents do all year."

KENTUCKY ALLIANCE FOR DRUG ENDANGERED CHILDREN

Since December 2004, over 14,000 Kentucky professionals have received training about the needs of Kentucky's drug endangered children. These children, once considered a subset of our nation's abused children account for some 88% of children under the age of four and over three-fourths of all Kentucky's abused children. Indeed, these children are not a subset, but a majority. The goal of the Kentucky Alliance for Drug Endangered Children through the University of Kentucky housed Drug Endangered Child Training Network seeks to improve access to current information to all professionals.

Kentucky emergency responders, child protective service workers, mental health providers, nurses, teachers, and more can now complete training on a variety of issues related to the needs of drug endangered children without leaving their desk. A basic drug endangered child module intended for all disciplines, and a course that addresses issues related to investigations are now available at www.drugendangeredchild.org. Other courses on medical toxicology are available for viewing as well.

It is the goal of Kentucky's Alliance for Drug Endangered Children that training needs of professionals are met in a way accessible to all. Therefore, for those who would like to request a live training may also be requested online. An online calendar is available for viewing or to submit your local training event for posting. It is through working together and assuring dissemination of the latest information that families impacted by addiction can get the help they need.